

## Three Easy Steps to Apply:

- 1. Read and complete the application form.
- Fax, e-mail or send the application form to the contact below.
   MassDEP will need the signed original. Send application to:

Julia Wolfe
MassDEP
One Winter Street
Boston, MA 02108
Phone: 617-292-5987
617-292-5778
Julia.wolfe@state.ma.us

3. MassDEP will contact you regarding the status of your application.

## Supermarket Recycling Program Certification Technical Assistance Application

The Massachusetts Department of Environmental Protection (MassDEP) has limited funds available to assist supermarkets in setting up organics recycling programs. MassDEP will evaluate each application and make awards based on previous assistance and specific needs. To apply, please *complete and sign* the following form and send to the contact listed in the box on the left. Please use a separate sheet of paper, if necessary.

For more information on the Supermarket Recycling Certification Program visit <a href="https://www.mass.gov/dep/recycle/supermkt.htm">www.mass.gov/dep/recycle/supermkt.htm</a>. Questions may be directed to Julia Wolfe at MassDEP at 617-292-5987 or julia.wolfe@state.ma.us.

1.	Co	Contact Information:				
	a.	Name of Company or Chain:				
	b.	Name of Company or Chain: In order to apply for technical assistance, your organization needs to have a contact that is responsible for administering an organics diversion program. Please list your contact below (name, title, address, phone, e-mail):				
		Name:				
		Title:				
		Address:				
		Phone:				
		E-Mail:				
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2. **Previous MassDEP Assistance**: Has your company received previous technical assistance through MassDEP for an organics or other type of recycling program? This could be either assistance through a MassDEP staff person or through a contractor provided by MassDEP. If so, please include the names and locations of each of the stores and describe the previous assistance provided, if known:

Store Name	Address	City	Type of Previous Assistance

3. **Request for Technical Assistance**: In the following table, please list the store locations requesting technical assistance and identify the type of assistance you are requesting (see explanation of a – e below). Each location may list more than one type of technical assistance request. Please note that a condition of receiving technical assistance is to provide data (e.g, store locations, program benefits, and consolidated tonnage information) to MassDEP in order to quantify progress.

Types of Assistance:

a. *Pre-composting Analysis*. This includes a series of telephone conversations with the appropriate company, chain, or store manager who has access to solid

- waste and recycling information. An individualized cost benefit analysis of a composting program at the store(s) will be completed, along with up to 10 recommendations on how to proceed.
- b. Internal Program Negotiation Assistance: This assumes that a pre-composting analysis has been completed. A contractor will be available to attend up to 3 meetings with upper management to assist with internal discussions on moving forward with a composting program. A preliminary list of haulers and composting facilities to use will be provided to each store.
- c. Hauler and Composting Facility Identification Assistance: This assumes that the company has committed to a composting program, but needs a consultant to assist in identifying a list of haulers to haul materials and a list of composting sites that will accept the material. The company has assigned in-store contacts at each location to oversee the composting program. Up to 10 hours of technical assistance will be provided each store.
- d. Training Assistance Program. The company has committed to a composting program, identified in-store contacts at each store location, identified a hauler (and composting facility if applicable) but needs start-up technical assistance to train store associates. A training program will be developed and up to three trainings will be available for store managers and associates. This also includes some follow-up monitoring and troubleshooting.
- e. *Other:* Please describe, on a separate piece of paper, the type of assistance you would like if not listed above.

Store Name	Address	City	Type of Assistance (a – e)
(EXAMPLE)			
Supermarket X, Store #12	25 Main Street	Anytown	a, b

4.	Matching Resources: Although cost sharing or matching is not required as a condition
	of eligibility for receiving technical assistance, applicants proposing a voluntary financial
	or in-kind commitment of resources will increase the likelihood of funding. Please
	explain type or amount of match (e.g., funding, equipment, staff time).

**Signature of Appropriate Authority:** I am authorized by this chain or company to apply for this technical assistance:

Name:			

Address:

Telephone Number: \_\_\_\_\_

E-Mail: \_\_\_\_\_\_

Massachusetts Department of Environmental Protection One Winter Street Boston, MA 02108-4746

Commonwealth of

Massachusetts

Mitt Romney, Governor

Executive Office of Environmental Affairs Stephen R. Pritchard, Secretary

> Department of Environmental Protection Robert W. Golledge, Jr. Commissioner

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This information is available in alternate format by calling our ADA Coordinator at (617) 574-6872.



Signature: